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By

William J. Clemens
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: CLIFFORD et al.)

Group Art Unit: 3752

Serial No.: 10/004,936)

Examiner: D. Hwu

Filed: December 5, 2001)

Attorney Docket: 132815-2

For: ELECTROSTATIC PAINTING APPARATUS)
WITH PAINT FILLING STATION AND)
METHOD FOR OPERATING SAME)

(formerly 15605)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Honorable Sir:

Please amend the above-identified application as indicated on the following pages.

Respectfully submitted,

William J. Clemens
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000132815/0002/625282-1

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PAGE 3/13 * RCVD AT 5/13/2005 9:58:11 AM [Eastern Daylight Time] * SVR:USPTO-EFAXF-1/0 * DNIS:8729306 * CSID: * DURATION (mm-ss):05-00

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Message: Please see the following Response for filing in patent application S/N 10/004,938.

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FEE TRANSMITTAL For FY 2005 Effective 01/01/2003. Patent fees are subject to annual revision.		Complete if known	
		Application Number	10/004,936
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	12/05/2001
		First Named Inventor	Scott Clifford et al.
		Examiner Name	D. Hwu
		Group/Art Unit	3752
TOTAL AMOUNT OF PAYMENT (\$ 750)		Attorney Docket No.	132815-0002

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
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FEE CALCULATION						
1. Basic Filing, Search, and Examination Fees						
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity		Small Entity		Small Entity	
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee Paid (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0
2. EXCESS CLAIM FEES						
Fee Description						Small Entity
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						Fee (\$)
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						Fee (\$)
Multiple dependent claims						Fee (\$)
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
31 - 20 or HP =	11	50	550	Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.						
Inden. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
5 - 3 or HP =	2	200	200			
HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee (due is \$250 (125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)		
		/50 = (round up to a whole number)				
4. OTHER FEE(S)						
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge):						

SUBMITTED BY		Complete (if applicable)
Typed or Printed Name	William J. Clemens	Reg. No. 26,855
Signature	<i>William J. Clemens</i>	Deposit Account
	Date May 13, 2005	User ID

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